

Outbreak of cVDPVs

Polio Partners Group Meeting, 6 December 2019, Geneva Michel Zaffran, Director, Polio Eradication







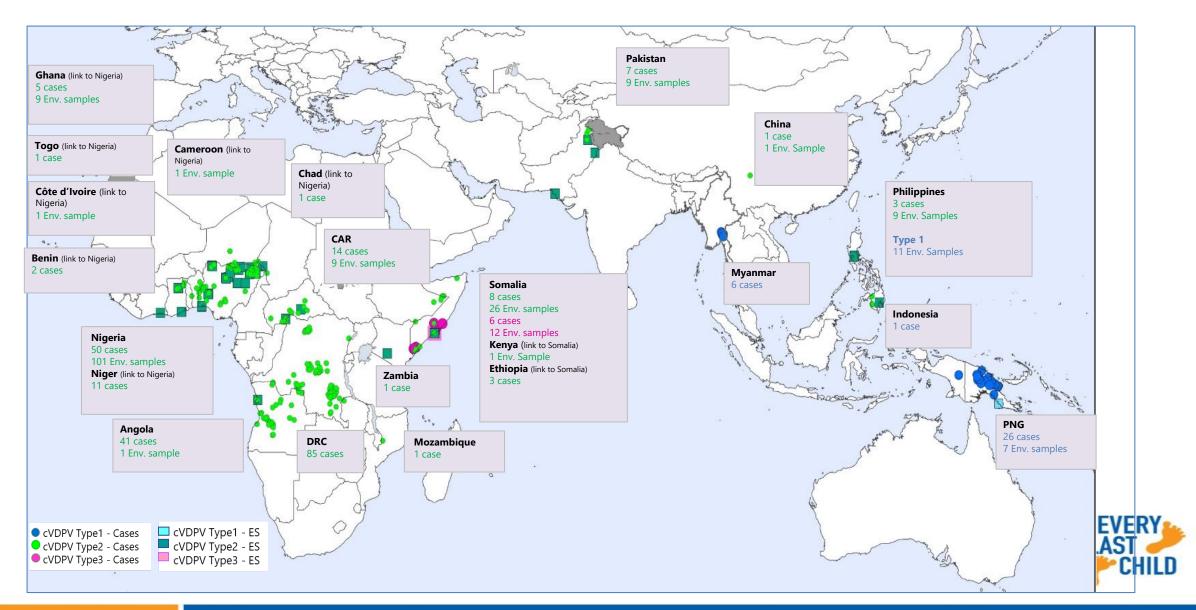






Current cVDPV Outbreaks







cVDPV2 outbreaks: an evolving new challenge

Significantly more cVDPV2 outbreaks than anticipated - High Risk of continuation and further spread

- 45 cVDPV2 outbreaks reported from 20 countries since the Switch (April 2016)
 - Three countries (Nigeria, Somalia, Angola) experience multiple outbreaks with international spread
 - Risk of further spread throughout Africa
 - Risk of Pakistan outbreak spreading within the country and to neighboring countries
- More than 80% of the outbreaks can be attributed to use of type 2 OPV after April 2016 (including mOPV2)
 - Most outbreaks (32/45) are reported in 2019.
 - In 2019, 40% of cVDPV2 emerge in places where mOPV2 has not been used (CAR, Angola, DRC Kasai, Nigeria Kogi)
- Origin of cVDPV2 outbreak in Pakistan and Philippines remains unclear
- More than 360 million doses of mOPV2 used since April 2016
 - Risk of depletion of stockpile
- As the number of outbreaks is increasing, human resource and financing needs are rapidly expanding RY and may exceed capacity



Next 12-18 month strategy and plan to control cVDPV2 outbreaks

Stopping current outbreaks while preventing new emergences:

- Ensure cVDPV2 outbreaks are rapidly detected, timely and adequately responded to using Sabin OPV2 while minimizing the risk associated with its use
- Ensure adequate supply of monovalent OPV2 is available until it is no longer required
- Accelerate novel OPV2 as an alternative and ultimately as a replacement to Sabin OPV2
- Ensure Member States, GPEI partners, program staff, expert committees and other stakeholders and the general public understand the risks of cVDPV2 and how GPEI proposes to manage these risks
- Offer contingency measures, in the event the Strategy fails to stop cVDPV2 transmission.

